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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

☐ Declaration  
Submitted With Initial  
Filing

OR

☒ Declaration  
Submitted after Initial  
Filing (surcharge  
(37 CFR 1.16 (e))  
required)

Attorney Docket Number	EX03-065C-US
First Named Inventor	Francis-Lang, et al
COMPLETE IF KNOWN	
Application Number	10/528,168
Filing Date	3/16/2005
Art Unit	
Examiner Name	

**I hereby declare that:**

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

FLJ20647S as Modifiers of the p21 Pathway and Methods of Use

the specification of which (Title of the Invention)

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 9/15/2003 as United States Application Number or PCT International

Application Number US03/28903 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended specifically referred to above.

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Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

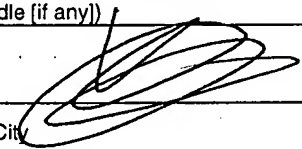
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Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number				23500		OR <input type="checkbox"/> Correspondence address below	
Name Exelixis, Inc.							
Address 170 Harbor Way							
City South San Francisco			State CA		ZIP 94083-0511		
Country US			Telephone 650-837-7000		Fax 650-837-8234		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF SOLE OR FIRST INVENTOR:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))			Helen		Family Name or Surname		
					Francis-Lang		
Inventor's Signature					Date		
					7/13/05		
Residence: City		State		Country		Citizenship	
San Francisco		CA		US		GB	
Mailing Address 1782 PACIFIC AVENUE, APT. 2							
City		State		Zip		Country	
San Francisco		CA		94109		US	
NAME OF SECOND INVENTOR:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))			Lori		Family Name or Surname		
					Friedman		
Inventor's Signature					Date		
Residence: City		State		Country		Citizenship	
SAN CARLOS		CA		US		US	
Mailing Address 113 ARUNDEL ROAD							
City		State		Zip		Country	
SAN CARLOS		CA		94070		US	
<input checked="" type="checkbox"/> Additional inventors or a legal representative are being named on the 1 supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.							

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Supplemental Sheet**Page 3 of 3

<b>Name of Additional Inventor, if any</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
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Thomas		Kidd	
Inventor's Signature		Date	
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		Citizenship	GB
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Mailing Address			
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Siobhan		Roche	
Inventor's Signature		Date	
Residence: City	COOLOCK	State	DUBLIN
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		Citizenship	IE
Mailing Address 30 MOATFIELD PARK			
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Kim		Lickteig	
Inventor's Signature		Date	
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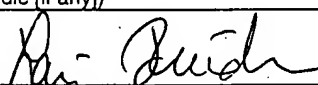
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Inventor's Signature						Date	
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Thomas			Kidd		
Inventor's Signature <i>Tom Kidd</i>				Date <i>7/14/05</i>	
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Address 170 Harbor Way							
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Country US			Telephone 650-837-7000			Fax 650-837-8234	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF SOLE OR FIRST INVENTOR:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Helen				Francis-Lang			
Inventor's Signature						Date	
Residence: City San Francisco			State CA		Country US		Citizenship GB
Mailing Address 1782 PACIFIC AVENUE, APT. 2							
City San Francisco			State CA		Zip 94109		Country US
NAME OF SECOND INVENTOR:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Lori				Friedman			
Inventor's Signature						Date	
Residence: City SAN CARLOS			State CA		Country US		Citizenship US
Mailing Address 113 ARUNDEL ROAD							
City SAN CARLOS			State CA		Zip 94070		Country US
<input checked="" type="checkbox"/> Additional inventors or a legal representative are being named on the 1 supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.							

**DECLARATION****ADDITIONAL INVENTOR(S)  
Supplemental Sheet**

Page 3 of 3

<b>Name of Additional Inventor, if any</b>				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))			Family Name or Surname		
Thomas			Kidd		
Inventor's Signature				Date	
Residence: City	TRUCKEE	State	CA	Country	US
Mailing Address		15282 WATERLOO CIRCLE			
Mailing Address					
City	TRUCKEE	State	CA	ZIP	96161
Country			US		
<b>Name of Additional Inventor, if any</b>				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))			Family Name or Surname		
Siobhan			Roche		
Inventor's Signature <i>Siobhan Roche</i>				Date 07/17/05	
Residence: City	COOLOCK	State	DUBLIN	Country	IRELAND
Mailing Address		30 MOATFIELD PARK			
Mailing Address					
City	COOLOCK	State	DUBLIN	Zip	5
Country			IRELAND		
<b>Name of Additional Inventor, if any</b>				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))			Family Name or Surname		
Kim			Lickteig		
Inventor's Signature				Date	
Residence: City	SAN FRANCISCO	State	CA	Country	US
Mailing Address		144 MISSOURI STREET			
Mailing Address					
City	SAN FRANCISCO	State	CA	Zip	94107
Country			US		

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

☐ Declaration  
Submitted With Initial  
Filing OR  
☒ Declaration  
Submitted after Initial  
Filing (surcharge  
(37 CFR 1.16 (e))  
required)

Attorney Docket Number	EX03-065C-US
First Named Inventor	Francis-Lang, et al
COMPLETE IF KNOWN	
Application Number	10/528,168
Filing Date	3/16/2005
Art Unit	
Examiner Name	

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

FLJ20647S as Modifiers of the p21 Pathway and Methods of Use

the specification of which (Title of the Invention)

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 9/15/2003 as United States Application Number or PCT International

Application Number US03/28903 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

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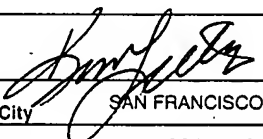
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## DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number				23500		OR <input type="checkbox"/> Correspondence address below	
Name Exelixis, Inc.							
Address 170 Harbor Way							
City South San Francisco			State CA			ZIP 94083-0511	
Country US			Telephone 650-837-7000			Fax 650-837-8234	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
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<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S)</b> Supplemental Sheet
Page 3 of 3	

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Siobhan			Roche		
Inventor's Signature				Date	
Residence: City	COOLOCK	State	DUBLIN	Country	IRELAND
Citizenship IE					
Mailing Address 30 MOATFIELD PARK					
Mailing Address					
City	COOLOCK	State	DUBLIN	Zip	5
				Country	IRELAND
Name of Additional Inventor, if any			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle (if any))			Family Name or Surname		
Kim			Lickteig		
Inventor's Signature 				Date 7/14/05	
Residence: City	SAN FRANCISCO	State	CA	Country	US
Citizenship US					
Mailing Address 144 MISSOURI STREET					
Mailing Address					
City	SAN FRANCISCO	State	CA	Zip	94107
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